#### **CARITEN HEALTH PLAN, INC.**

Initially issued a certificate of authority on 12/16/95 as PHP Health Plans, Inc. On 12/4/96, the name was changed to Cariten Health Plan, Inc.

#### ADDRESS:

1420 Centerpoint Blvd. - Knoxville, TN 37932 - (865) 670-7335

#### WEBSITE:

www.cariten.com

**Service Area by County** 

West Tennessee Area: NONE Middle Tennessee Area: NONE

East Tennessee Area: Anderson, Blount, Bradley, Campbell,

Carter, Claiborne, Grainger, Green, Hamblen,

Hamilton, Hancock, Hawkins, Jefferson, Johnson, Knox, Loudon, McMinn, Meigs, Monroe, Morgan, Polk, Rhea, Roane,

Sevier, Sullivan, Unicoi, Union and Washington

The Independent Review Organization used by this HMO is MCMC, Inc.

IRO APPEALS	Number Requested	Resolved in favor of member	Resolved in favor of HMO
year ending 12/31/2004	0	0	0
year ending 12/31/2003	0	0	0
year ending 12/31/2002	0	0	0
year ending 12/31/2001	0	0	0
year ending 12/31/2000	0	0	0
year ending 12/31/1999	0	0	0

#### **CARITEN CUSTOMER SERVICE**

If you have a complaint about your Cariten HMO, please call 1-800-284-0042

#### **HMO GRIEVANCE STATISTICS**

NUMBER OF GRIEVANCES/INQUIRIES FOR 2004

of the grievances reported **39%** were resolved successfully of the grievances reported **61%** were resolved adversely

CATEGORY	Number of Inquiries to the HMO	Number of written	Number of resolved grievances	Number of adverse decisions	Number of successful resolutions
1) availability/delivery of service		1	1	1	0
2) claim payment/amount of payment		89	89	42	47
3) contract terms and conditions		63	63	51	12
4) other		0	0	0	0
TOTAL		153	153	94	59

### NUMBER OF GRIEVANCES/INQUIRIES FOR 2003

of the grievances reported **51%** were resolved successfully of the grievances reported **49%** were resolved adversely

	Number of Inquiries to the	Number of written	Number of resolved	Number of adverse	Number of successful
CATEGORY	НМО	grievances	grievances	decisions	resolutions
1) availability/delivery of service		0	0	0	0
2) claim payment/amount of payment		91	91	42	49
3) contract terms and conditions		45	45	24	21
4) other		0	0	0	0
TOTAL		136	136	66	70

# NUMBER OF GRIEVANCES/INQUIRIES FOR 2002

of the grievances reported **51%** were resolved successfully of the grievances reported **49%** were resolved adversely

	Number of Inquiries to the	Number of written	Number of resolved	Number of adverse	Number of successful
CATEGORY	НМО	grievances	grievances	decisions	resolutions
1) availability/delivery of service		0	0	0	0
2) claim payment/amount of payment		46	46	18	28
3) contract terms and conditions		18	18	10	7
4) other		17	17	12	6
TOTAL		81	81	40	41

#### HMO Greivance Statistics NUMBER OF GRIEVANCES/INQUIRIES FOR 2001

of the grievances reported **60%** were resolved successfully of the grievances reported **40%** were resolved adversely

	Number of Inquiries to the	Number of written	Number of resolved	Number of adverse	Number of successful
CATEGORY	HMO	grievances	grievances	decisions	resolutions
1) availability/delivery of service		1	1	0	1
2) claim payment/amount of payment		62	62	23	39
3) contract terms and conditions		33	33	14	19
4) other		16	16	7	9
TOTAL		112	112	44	68

# NUMBER OF GRIEVANCES/INQUIRIES FOR 2000

of the grievances reported **57%** were resolved successfully of the grievances reported **43%** were resolved adversely

	Number of Inquiries to the	Number of written	Number of resolved	Number of adverse	Number of successful
CATEGORY	HMO	grievances	grievances	decisions	resolutions
1) availability/delivery of service	N/A	42	42	25	17
2) claim payment/amount of payment	N/A	75	75	26	49

3) contract terms and conditions	N/A	75	75	31	44
4) other	N/A	0	0	0	0
TOTAL	N/A	192	192	82	110

### NUMBER OF GRIEVANCES/INQUIRIES FOR 1999

of the grievances reported **51%** were resolved successfully of the grievances reported **48%** were resolved adversely

CATEGORY	Number of Inquiries to the HMO	Number of written	Number of resolved grievances	Number of adverse decisions	Number of successful resolutions
1) availability/delivery of service	N/A	37	37	26	11
2) claim payment/amount of payment	N/A	69	69	28	41
3) contract terms and conditions	N/A	26	26	10	16
4) other	N/A	N/A	N/A	N/A	N/A
TOTAL	N/A	132	132	64	68

## NUMBER OF GRIEVANCES/INQUIRIES FOR 1998

of the grievances reported **47%** were resolved successfully of the grievances reported **53%** were resolved adversely

CATEGORY	Number of Inquiries to the HMO	Number of written	Number of resolved grievances	Number of adverse decisions	Number of successful resolutions
1) availability/delivery of service	N/A	28	28	18	10
2) claim payment/amount of payment	N/A	49	49	21	28
3) contract terms and conditions	N/A	8	8	6	2
4) other	N/A	1	1	1	0
TOTAL	N/A	86	86	46	40

**PLEASE NOTE:** an adverse decision indicates the decision was against member, not that the HMO was incorrect a successful resolution means the grievance was resolved to the members satisfaction N/A means the information was not provided or available

### **10 YEAR MEMBER ENROLLMENT STATISTICS**

Year	Individual	Medicare	Group	Number	TOTAL	Average
i eai	Members	members	members	groups	members	Annual
ending 12/31/04	0	21,675	13,298	28	34,973	33,041
ending 12/31/03	0	12,322	10,864	32	23,066	21,554
ending 12/31/02	0	12,328	11,191	24	23,519	15,394
ending 12/31/01	0	9,357	13,080	31	22,437	20,634
ending 12/31/00	0	5,686	12,394	44	18,080	20,000
ending 12/31/99	0	2,974	11,248	55	14,222	12,958
ending 12/31/98	0	1,526	9,810	62	11,336	10,703
ending 12/31/97	0	0	7,774	11	7,774	6,744
ending 12/31/96	0	0	5	1	5	5
ending 12/31/95	0	0	0	0	0	0
ending 12/31/94	0	0	0	0	0	0
ending 12/31/97 ending 12/31/96 ending 12/31/95	0	0 0 0	7,774 5 0	11 1 0	7,774 5 0	6,744 5 0

CARITEN HEALTH PLAN, INC.	As of	As of	As of	As of
	3/31/2005	6/30/2005	9/30/2005	12/31/2005
ASSETS	\$70,675,189	\$74,858,146	\$99,603,475	\$76,637,146
LIABILITIES	\$42,128,871	\$42,500,383	\$62,013,512	\$48,729,056
TOTAL MEDICAL AND HOSPITAL EXPENSES	\$49,378,470	\$98,505,260	\$148,936,426	\$201,053,952
TOTAL ADMINISTRATIVE EXPENSES	\$1,877,680	\$4,023,261	\$7,109,224	\$13,515,640
UNCOVERED EXPENSES	\$ -	\$ -	\$1,165,176	\$905,665
PREMIUMS NON TN CARE	\$52,487,232	\$107,284,438	\$164,395,438	\$226,034,936
TOTAL CAPITAL AND SURPLUS	\$28,546,318	\$32,357,763	\$37,589,963	\$27,908,090
NET INCOME	\$1,566,443	\$5,380,365	\$10,618,435	\$14,616,607
RATIO OF MEDICAL EXPENSES TO PREMIUMS	94.08%	91.82%	90.60%	88.95%
RATIO OF ADMINISTRATIVE EXPENSES TO				
PREMIUMS	3.58%	3.75%	4.32%	5.98%